PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number
10998 900
10/10/200

İ		CLAIMS A	S FILED	- PART	i			SMALL	ENTITY		OTHE	R THAN	
_			(Colum	(Column 1)		(Column 2)		TYPE		OF		ALL ENTITY	
TOTAL CLAIMS								RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.0	0 OF	BASIC FE	770.00	
Ţ	OTAL CHARGE	ABLE CLAIMS	minus 20=					X\$ 9=		OR	X\$18=		
IN	DEPENDENT (CLAIMS	2 minus 3 =		0			X43=	1	OR	Voc	 	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=	 	7		 	
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	, ,	TOTAL	 	OR	<u> </u>	220	
CLAIMS AS AMENDED - PART II								IOIAL	<u> </u>	OR	TOTAL	7/V	
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRES	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+145=		OR.	+290=		
								TOTAL		اا	TOTAL		
		(Column 1)		(Colum	n 3)	(Column 3)	Α	DDIT. FEE		JOR .	ADDIT. FEE		
		CLAIMS	T T	HIGHE		(Column 3)	r		ADDI	7 r		4551	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESE	NTATION OF ML	LIPLE DEF	ENDENT	LAIM		T	+145=		OR	+290=		
								TOTAL			TOTAL	•	
	(Column 1) (Column 2) (Column 3)							DDIT. FEE I		1 011 /	DDIT. FEE		
T	`	CLAIMS		HIGHES	ST	(Column 3)	_			1 6	•	·	
MEN		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent		Minus	***		=		X43=			X86=		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
* if	the entry in colum	nn 1 is less than the	entry in colum	nn 2 writa "O	* in colu	ımn 3		145=		OR	+290=		
** If	the "Highest Nun	nber Previously Pai	d For IN THIS	SPACE is le	ess than	20. enter "20."	AD	TOTAL DIT. FEE	•	OR A	TOTAL DDIT. FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													